## Submissions by Veterinarians

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## Submissions by Organising Committees

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I am writing to strongly endorse the decision of clubs affiliated with Equestrian Australia to make Hendra vaccination for competition compulsory.

I am an equine veterinarian working in a Hendra virus endemic area. I have been volunteering at horse events for years as a veterinarian, 99% of which has been for no payment but rather my little bit, putting back into the horse industry. I have also been the Veterinarian for the Australian Dressage and Para equestrian teams for four years, including the London Olympics.

My business is sick horses. There is absolutely no doubt in my mind that the gold standard for horse care includes Hendra vaccination in Hendra endemic areas. It is the single most effective weapon we have to prevent Hendra virus in horses. The equine vet numbers are very small and dwindling. The number of vets who will not attend unvaccinated sick horses is increasing, increasing the risk of exposure to the veterinarians who will attend unvaccinated sick horses. Equine Veterinarians and staff are very much at risk of exposure to Hendra virus. My nurse had Hendra virus in the Redlands Veterinary Clinic outbreak and still has ongoing health issues associated with the disease. She can work part time but it reminds me every week of the risk to our health attending non vaccinated horses. My friend Ben Cuneen died due to Hendra virus.

My practice with three full time equine veterinarians are in the top five practices for vaccination of horses in Australia regarding numbers done. We have seen very few problems with the vaccine – certainly not as people report on facebook. Mainly sore necks, irritability and off colour, all of which have resolved with anti inflammatories. On closer discussion with people regarding their so called vaccination reactions, most of them I believe are completely unrelated to the vaccination. Some behavioural problems or wellness problems occurring weeks if not months after any vaccine has been given. My own horses have been vaccinated including broodmares which have foaled and now their foals have been vaccinated with no ill effect.

It is very easy to risk someone else’s life. Calling a vet to a sick unvaccinated horse is risking their life. However, it has been shown that the virus can be shed for 12 days prior to the horse becoming clinically ill and in fact, my nurse was not at work when the horses at Redlands became ill. She contracted the virus in the shedding non clinical period. So, any exposure to a horse in this non – clinical period can potentially risk human health. I often think back to when HIV was first discovered and the medical profession were finding their way on how to respond to these. I feel this is where we are in the veterinary profession with Hendra virus. However, a lone vet in the field, responsible for everything is completely different to a hospital with teams of people who can help and discuss. We are very much alone in the heat of the moment in the field.
On this theme, even if vets are aware of Hendra virus and its implications, we can be prosecuted. There are several cases already of vets being prosecuted for their handling of Hendra cases. The only way we can protect our staff and our business’s is to not attend sick unvaccinated horses. This also applies to events. I have attended a meeting recently with biosecurity officers at Equestrian Queensland and no-one has the answers as to how different potential Hendra situations should be handled. At the end of the day, the responsibility still comes down to the vet in attendance and if it is deemed that Hendra virus is present, there is no doubt in my mind that mistakes will be made according to workplace health and safety obligations.

I feel that vaccination of horses should be compulsory across the board. This will take the pressure off the veterinary industry and all the other businesses providing health care in particular to horses. This could start with compulsory vaccinations for competition horses as an example to the rest of the horse industry illustrating responsible horse ownership. Particularly as vets are an important part of providing services to competitions for sickness and injury.

I understand the discussions about failure to export to UAE and Malaysia, I understand the added expense and I understand people’s concern over perceived vaccination reactions. I also understand there is only one product on the market. However, I still believe that if people were to put themselves in the position of a horse vet they wouldn’t risk their own lives.

Yours faithfully,

Janine F. Dwyer
M.A.C.V.Sc.(Eq.Med.&Surg.)
07 August 2015

Australian Competition and Consumer Commission

adjudication@accc.gov.au

By email

Dear Sir or Madam

Submission on the Exclusie dealing notification N98410 lodged by Equestrian Australia.

My name is Jonathan James Fearnley, and I am a private veterinarian, and I practice from my Nanango Veterinary Surgery at 104 Drayton Street, Nanango Q 4615.

I regularly supply my services to the sport of endurance riding, serving as Head Veterinarian at four to six rides a year across Queensland. These rides range from weekend rides that host combination of distances from 80 km down to 5 km training rides, championship rides of up to 160 km in 24 hours, and multi-day marathon rides of up to 400 km over 5 days.

These rides are a mix of requirements for the horses to have mandatory Hendra virus vaccinations or for an open status of Hendra virus vaccinations. The governing bodies of the sport, the Australian Endurance Riders Association (AERA) and the Queensland Endurance Riders Association (DERA) recommend and encourage Hendra vaccination as the single most effective way of risk mitigation of Hendra virus to the sport.

On 28th August 2015 I attended the 160 km QERA State Championship Ride at Wondecla, hosted by the Far North Queensland Endurance Riders (FNQERA). This event was run as a non-mandatory Hendra vaccination ride.

The organisers (FNQERA) had expected a field of around 75 horses for a state championship, much less than the fields of 100 to 150 for a similar ride in South East Queensland. They were disappointed to have total nominations for the event of less than 20 horses, with only 11 starting in the 160 km championship ride and another 4 horses in an 80/120 elevator ride run in association with the event. Of these horses, three were unvaccinated and 12 were vaccinated.

The ride base of Wondecla is about 20 km from the site of a recent Hendra virus horse death at Kiari on the Atherton Tableland in mid- to late July. This may have influenced some riders against competing. The grounds are include a lot of flowering gum trees that are a food source for flying foxes and may have posted a threat to horses who were stabled on the grounds.

Endurance riding can be very stressful on the horse and in some cases horses have been known to develop colic after the ride, in part as a consequence of the exertion and dehydration from the long distance exercise. The veterinarians role is to monitor the welfare of the horses and provide
treatment if required. Should the horse be required to go to surgery to treat the colic, an
unvaccinated horse would provide an unacceptable risk to the staff of the referral veterinary
hospital, and all local referral hospitals indicated they would be unable to accept unvaccinated
horses for surgery. Publicity of this information may have contributed to the reduction in
nominations.

The vetting of unvaccinated horses is a difficult issue. The animals are repeatedly examined during
the ride with a range of parameters monitored to assess the horse’s condition and welfare. This
includes being exposed to their bodily fluids which could be a source of Hendra virus in an incubating
infection. Horses incubate the virus for six to 10 days before clinical signs develop. Horses
incubating the virus are a threat to attending people, including veterinarians, and this is the reason
that a number of experienced veterinarians have turned their backs on the sport.

Vaccination is the single most effective way of risk management for Hendra virus for horses and
humans. Ride organisations can use mandatory vaccinations to ensure protection of the horses and
people involved, and so make the sport safe.

Yours faithfully

Jon Fearnley
4 September 2015

Dr Richard Chadwick
General Manager
Adjudication Branch ACCC
By email: adjudication@accc.gov.au

N98410-Equestrian Australia- Private Submission

Dear Dr Chadwick

I am writing in relation to the Equestrian Australia (EA) notification N98410, regarding Equestrian Australia’s proposal that vaccination against Hendra virus be a condition of entry for competitions, in certain circumstances, with particular reference to events held in the Hendra endemic areas of Queensland (QLD) and Northern New South Wales (NSW) and horses travelling from these areas to compete at EA affiliated events.

I believe that equestrian events in which Hendra vaccination is a condition of entry should be encouraged if a risk assessment deems that it is appropriate due to the risk to horses, competitors, volunteers, officials and members of the public. This risk is greatest within the Hendra endemic regions of QLD and northern NSW and at events held in other areas where horses are travelling from Hendra endemic regions. The incubation period is from 5-16 days, and with the faster transport and the availability of air transport, it is very feasible that a horse could travel from within a Hendra endemic area to an event outside these areas, within the incubation period and whilst sub-clinically infected with Hendra virus.

Both Biosecurity Queensland and the New South Wales Department of Primary Industries state in their official guidelines that the Hendra virus (HeV) vaccine is: “the single most effective way of reducing the risk of Hendra virus in horses”. As a peak equestrian body, EA has an obligation to allow the proper conduct of events in accordance with EA rules and the international standards. In order to conduct these events, they must be able to keep horses, competitors, volunteers, officials and members of the public safe. The HeV vaccine allows this to occur.

Many people involved with the administration of EA events are volunteers. Some do not own horses and may not be aware of HeV, therefore it is imperative that EA is able to protect people and maintain the public health which is required when running equestrian events. At many events competitors camp in close confines and there is a greater potential for exposure to HeV. Also organiser’s and officials involved with administering an equestrian event deserve the right to be able to protect themselves and their committee members and volunteers against HeV. A horse owners decision not to vaccinate for HeV, affects not only themselves, but every person coming into contact with that horse. Obviously the greatest risk in when dealing with a sick horse, but it is human nature to assist when an animal is in distress, sometimes to the detriment of oneself, as in the case of the 4 people who have passed away as a result of HeV infection. Therefore it is imperative that organising committees are given
the right to protect themselves and their committee members and volunteers from HeV infection by the use of the HeV vaccine, as the “Single most effective way of reducing HeV infection in the horse”.

The HeV vaccination has been available for nearly 3 years, and was recently registered by the APVMA, meaning it has passed stringent regulatory testing and conditions, and has been proven to be safe and effective. Adverse events have been investigated thoroughly and a current adverse reaction rate of 0.28% is consistent with similar vaccinations in horses and in other species.

The HeV vaccine also provides the best method of protecting workers involved in the conduct of equestrian events. Queensland workplace health and safety recognise HeV vaccination as the “single most effective way of reducing the risk of HeV infection in horses and provides a work health and safety and public health benefit” [https://www.worksafe.qld.gov.au/__data/assets/pdf_file/0010/82981/alert-hendra-infotorvet.pdf]. This is extremely important for veterinarians and their staff providing professional services to equestrian events, but also for other professionals providing services at equestrian events such as farriers, transport operators and many others.

The use of the HeV vaccine is also very critical to help with horse welfare and in allowing the provision of gold standard veterinary care. HeV is an impossible virus to diagnose in the field and requires a blood test or swabs from certain areas of the horse and a PCR test to be performed at a government approved laboratory. There are logistical issues with the dispatch of samples and a delay due to the transportation of samples to these laboratories. The virus can present with very variable clinical signs, many of which are non-specific and similar to very common horse ailments. Therefore any horse showing symptoms where HeV is on the differential diagnosis list, must be treated according to government guidelines such as the Biosecurity Queensland guidelines [https://www.daf.qld.gov.au/__data/assets/pdf_file/0005/26770/2913-Guidelines-for-veterinarians-handling-potential-Hendra-virus-infection-in-horses-V5.1.pdf]. Therefore referral to equine veterinary facilities can be delayed. Equine Veterinary facilities also need to protect their staff, horses in their care and their businesses, and this can delay the availability of horse hospital facilities, until exclusion results have been received, compromising the horses care.

In summary, it is for the above mentioned reasons that I believe EA should be allowed (and encouraged) to run equestrian events which have HeV vaccination requirements in areas where Hendra Virus is endemic or for horses travelling from these areas. This will assist with the health and safety of event organiser’s, officials, volunteers, competitors and horses and allow the provision of gold standard veterinary care and referral for horse which require veterinary treatment.

Yours Sincerely

Dr Luke Annett BSc BVMS BSc

Private Veterinarian, QLD endurance honorary veterinarian, FEI** Veterinarian (endurance), competitor and organising committee member for equestrian events (mainly endurance) within Australia.
To Whom It May Concern,

I would like to have my public support for compulsory equine Hendra virus (HeV) vaccination at competitions recognised as follows:

1. As a horse owner and breeder in South East Queensland: We breed for both performance events (e.g. endurance rides) and livestock work (beef cattle). As such we are in close contact with our horses. So are our ancillary people who help care for the horses. These animals represent a considerable investment in time and money as horse productivity is measured in decades, not weeks or months. As a horse owner a feel a sense of responsibility to those around me to not expose them to preventable risk - I believe Hendra virus infection falls into this category and as such, vaccination should be undertaken to protect both horses and humans.

My own horses were all vaccinated the first week that the vaccine was released. Most have had 5 doses of vaccine to date and will continue to do so into the future.

As an animal owner I know that vaccination is looked upon as a risk management proposal. What are the risks from vaccinating? And from not vaccinating? It is very hard to get some people to accept vaccination for Hendra when they do not vaccinate themselves, nor their horses for diseases long recognised as being lethal - e.g. tetanus.

2. As a Veterinary Practice owner: Horse work represents 5% of the total case load at my clinic in Jacobs Well. Staff undergo training in PPE use and the need to exclude Hendra virus infection when treating sick horses. Personal communication with the Murwillumbah vets and there experiences with hendra virus infection shows just how significant an issue it is in the South East Queensland/Northern Rivers area of NSW.

Vets find the need to register vaccinations of HeV a reassuring factor, as we can check the status of any horses we are examining. What I find concerning is the number of people who claim their horses are vaccinated, yet they can provide no proof - often the horses do not even have readable microchips. Last year we had a horse found dead in a dam on an agistment property - the owner could show a vaccination certificate for a horse which was current, but the horse had no readable microchip and so exclusion testing was necessary, and counselling of people involved in retrieving the horse from the dam necessary as there was blood from all orifices.

In the hundreds of hendra vaccines done since by my practice, we have heard some anecdotal reports of injection site swellings. Most clients recognise this as being transient and certainly less than that seen with strangles vaccination.

Recently, we had a client ringing wanting a pyrexic, non-hendra vaccinated horse examined. We offered to attend and treat as appropriate, while performing hendra exclusion testing. The client declined testing and so we did not attend the horse. As veterinarians, we had a duty of care to ourselves, the patients we treat and in contact people, to ensure that Hendra virus is not a cause of illness.

It is my belief that Hendra virus has not just suddenly appeared in horses via Flying Foxes. It is only with modern technology that we have recognised the problem. Recognition has been hampered by the fact that most cases are sporadic and only involve one horse death - which is often dismissed as colic, accident etc. The significance of Hendra will only increase in horses in our local region as the population of humans and horses expands throughout the area.
Vaccination cost is often cited by owners as a problem. As is the case in all things, market forces will prevail regarding costs. But as in all things, even if the vaccine was free there would still be opposition by some to doing their horses.

3. As a Veterinarian officiating at equine events, especially Endurance Rides, in South East Queensland and Northern New South Wales: As part of hendra virus risk management at events, owners have to fill out a health declaration for each animal. This declaration includes daily temperature monitoring. Upon seeing how many novice horses in endurance are difficult to take their temperatures, the validity of this health declarations would seem to be dubious.

Endurance horse vetting involves close contact with horses. As such, this represents a risk factor for Hendra exposure. All vets undertaking this work acknowledge the risk, but wish to minimise when possible. Treatment of horses at these events often involves the use of large quantities of intravenous fluids (20-50 litres) i.e. invasive treatment in horses presumed to be Hendra negative.

The lack of compulsory vaccination at these events raises all sorts of issues re duty of care. A worse case scenario would involve having to quarantine a ride with 500-200 horses while awaiting test results on a suspect horse. What to do - do you let the horse and people travel? or do you hold in close proximity all horses and people on site? Possibly only vaccinated horses would be allowed to leave? The situation is certainly different from that seen with equine influenza (EI) where a delay in quarantining horses at events such as Warwick allowed the rapid spread of the virus throughout South East Queensland and Northern New South Wales.

Compulsory vaccination of horses at such events would go a long way to minimising the risks people handling horses at such events face. The risk cannot be totally eliminated, but can be more readily reduced. Endurance rides are traditionally run in the cooler times of year and coincide with the main Hendra virus infection times in horses.

People have a right to choose but they also have a duty of care - if they choose not to vaccinate then they should also be choosing not to compete.

John Norris BVSc(Hons), MANZCVS, CMAVA, BAgSc, CDec.
Jacobs Well Veterinary Surgery
3/1149 Jacobs Well Road
Jacobs Well, Qld, 4208
07 5546 1411
wellvet2011@hotmail.com
Dear Sir/Madam

I write in support of the Equestrian Australia’s submission for compulsory vaccination of horses from endemic areas with Hendra. I agree that there is only one vaccine available to horse owners but this vaccine is an excellent vaccine with a high safety margin. The Equestrian Australia should be congratulated upon this strong step in what has been a somewhat controversial path to vaccination of our horses. Hendra virus is a fatal virus that can be spread from an infected horse to people. There have been a number of deaths from the virus in people. The only way currently to protect people from Hendra virus exposure is to vaccinate horses. This vaccine has been developed through outstanding work of the Melbourne team headed by Dr D. Middleton through the difficult working conditions required to protect researchers from this deadly disease. They have developed an extraordinary vaccine that has been shown to have outstanding efficacy and very few side effects. The development of this vaccine was difficult and produced with outstanding scientific research and it is not likely that another vaccine will be produced.

The vaccine is essential to protect not only the horse owner but anyone else who comes into contact with the horse. This includes veterinarians, farriers, other horses and especially staff employed by the horse owner to feed, groom and look after the horse. The vaccine should be an essential part of the husbandry of the horse in an endemic area and Occupational Health and Safety requirements should require vaccination when staff are employed to care for these horses.

Although I do not work in an endemic area I have my own horses vaccinated as the flying foxes have been shown to be positive for the virus all down the east coast of Australia and a significant way inland. We do not know enough about the virus and why it has not been seen in the southern eastern Australia despite the positive flying fox population.

As a specialist veterinarian receiving referral horses from a wide area of NSW and Queensland our practice will not accept horses that have not been vaccinated into our hospital that have traveled from Hendra endemic areas in the last 30 days. This policy is strongly enforced and is in place to protect ourselves and our staff from potentially fatal exposure to this virus. Unfortunately this has meant that one horse that could potentially have been saved with our care died before they were shown to be negative to the virus.

The vaccine is an extremely important tool in our fight to protect our staff and friends against this fatal disease and I encourage you to support the EA in their strong stand against this disease.

Thank you

Catherine Russell

Specialist in Equine Medicine

Clovelly Intensive Care Unit

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To whom it may concern,

As a veterinarian with a strong interest in public health, working in a Hendra endemic area, and a history of working at Eventing competitions, Racetracks, and in Equine Reproduction I would like to register my opinion.

I have the strong belief that the ACCC should come down in favor of mandatory vaccination of horses coming from Hendra endemic areas. I submit this opinion based on the following points.

1. Hendra virus has caused over 90 equine deaths
2. Hendra virus has resulted in significant human mortality. The risk of Hendra virus exposure has also forced multiple people to have costly, experimental treatment to prevent their deaths.
3. Hendra virus is part of an emerging disease group of henipah viruses. Our ability to control vector species (bats) is minimal, and these viruses are appearing with increasing frequency and greater virulence. Significantly, these family of virus affect multi-species (to date horses, bats, dogs, and humans in the case of Hendra virus alone).
4. Hendra virus affected horses are infectious (thus potentially deadly) prior to developing any clinical signs, and the virus is spread in bodily secretions such as saliva and respiratory secretions. This means that there is a real risk for contact people, such as grooms, veterinarians, and riders, of fatal exposure at an event. One worst case scenario is that the event site and all its horses would be quarantined, a large number of people (>10 per horse) would need to be given risky experimental treatment, and people and valuable horses would die. This would come with significant costs including the cost of quarantine, medical and veterinary expenses, and inevitably compensation for victims and their families. Even more catastrophic would be the potential for horses to be infected at the event site and then spread throughout the country with the disease.
5. There is no scientific evidence of the Hendra virus vaccination producing adverse competition outcomes.
6. The mortality statistics as assessed by the AVPMA, the correct regulatory body for passing a vaccine into the Australian market is only 4 horses with deaths possibly associated with the vaccine (of these horses post-mortems and history show it is likely to be even fewer). There have been nearly 400,000 vaccinations administered. Each vaccine has been traced in an unprecedented use of microchip and Internet technology, meaning the accuracy of the data can be considered very high.
7. There is international precedence for compulsory vaccinations for competing horses without there having been deemed any negative impact on the fairness of competition. e.g. United Kingdom and USA.

I hope that the ACCC will come down on the side of science and public interest, rather than pandering to the loud, uninformed hysteria of a few.

Sincerely,
Dr Lauren Archer
Dear Mr Chadwick

SUBMISSION AGAINST EQUESTRIAN AUSTRALIA (EA) NOTIFICATION APPLICATION NO: N98410 AS NOT BEING IN THE PUBLIC INTEREST

I refer to the above mentioned EA application and wish to strongly make the following submissions against the granting of Notification to EA which, if granted, would confer immunity on EA to engage in exclusive dealing third line forcing by permitting mandatory Hendra (Hev) vaccination to be prescribed at equestrian events.

I wish to strongly state that having regard to the following reasons, I do not believe that mandatory HeV vaccination is in the public interest and that the likely benefit to the public from the notified conduct would not outweigh the likely detriment to the public resulting from EA engaging in the conduct.

The vaccine is still a relatively new product and even though it has not be registered the product in my veterinary opinion is not safe. I personally know of 2 horses that have died after receiving their Hendra vaccinations Theses horse died from immune medicated thromocytopenia which is a rare disease which in 30 years I had not seen in horses as a veterinarian, Since the last 12 months I personally know 2 that did from this disease with the common denominator being the fact they received their Hendra vaccination 10 days previously.

As President of our riding club , (North Coast Active Rider Group) we have had at lease 12 of of horses be severely effected by the vaccination with conditions ranging from colic to muscle stiffness malaise , inappetance and respiratory diseases. Many were unwell for weeks at a time.

Mandating the vaccine when it is highly reactive to horses is a poor decision. EA also has not offered these reactive horses a solution since the previous Hendra bylaw required concerned persons to go up in front of the pro-vaccine board itself and argue for exemptions . No suggestion of accepting a Hendra titre result was even made.

One must also realize that the board of EA is heavily represented by veterinarians, As such mandating a policy would stand to produce a large windfall to all those veterinarians on the board and those associated with the EVA ( Equine veterinarians of Australia) Coincidently the conflict of interest does not stop there since the sole manufacturer of the product Zoeits is a sponsor of EA and of the EVA so a mandating requirement would significantly increase the financial return to all involved.
There has never been a case of Hendra at an equestrian event in Australia in the 20 years we have known about Hendra. Horse to horse transmission of the virus has not been shown and the incidences of multiple positive cases were thought to have come about be contaminated equipment.

The only people that have died from Hendra did invasive procedures on dead or dying horses and realistically should have know better that to do those procedures without any PPE. It is highly unlikely that any such invasive procedure such as a postmortem would be performed at an equestrian event. Even specialists in the industry admit that the virus is "Very had to catch"

One must also be aware that it can not be proven that vaccination will assist in the incidence of a hendra outbreak and that there are in fact concerns that a vaccinated horse can still shed virus while remaining "healthy". This may in fact pose more of a risk to the public in that the horse may appear healthy and shed and hence contact with the horse may continue to expose people to the virus.

Might I also add that never have any point have EA released a full risk assessment of the Hendra potential at an event. Despite repeated requests for such a document none has been forthcoming.

EA seem "heel bent" on enforcing a mandatory policy completely disregarding its members wishes and concerns in this issue and the level of arrogance and secrecy in which they are pursuing this avenue is astounding. Even their attempts to go to the ACCC behind members to obtain immunity is beyond belief.

Might I also add that their wording is also particularly pro-inflammatory and reeks of scar mongering and I am sure would have been put together by non other than those who would benefit from such a mandating of vaccination policy (as in the EVA). For example the word endemic SHOULD NOT be used as endemic means everywhere. Hendra is a sporadic disease at the best and should actually have the word rare in front of it as well.

On these grounds, I therefore strongly urge the ACCC to object to EA's Notification and prevent immunity for this form of exclusive dealing from being conferred on EA.

Yours sincerely

Dorothea Hofman BVSc
Submission to ACCC in support of Exclusive Dealing Notification N98410 - Hendra Vaccination as being in the public Interest.

Mr Richard Chadwick  
General Manager of Adjudication  
Australian Competition and Consumer Commission  
GPO Box 3131  
CANBERRA ACT 2601  
C/- email address: adjudication@accc.gov.au

Dear Mr Chadwick

Our club, the Hastings Valley Dressage Club Inc. (HVDC) is a small dressage club of approximately 70 members located in the mid north coast area of NSW close to Wauchope and Port Macquarie. We are affiliated with Equestrian Australia (EA) and Dressage NSW.

We run our events at the shared facility of Wauchope Showground and have no control over horses that may be stabled at the ground overnight (either for an alternative event or travelling through). The Riding for Disabled Group keeps their horses on the ground (all Hendra Vaccinated) and holds events twice weekly. Many other local equestrian groups including Pony Clubs also use the ground in addition to the once yearly Wauchope Show. Wauchope Showground has public camping and caravan sites (in very close proximity to the stable area) and regular events such as the Growers Market.

We are also in a Hendra buffer zone with competitors regularly coming the short distance from Hendra hot spots for our events. As a small committee and club, we value the health and safety of our volunteers and the general public who share the ground. We also do not feel we have adequate resources to deal with a suspected Hendra case at our events.

We wish be able to make a prudent decision to allow only Hendra Vaccinated horses our events taking into account the following:

- Department of Primary Industry (DPI) advice on managing bio security risks;
- Australian Veterinary Association advice on managing the risks associated with Hendra outbreak and local veterinary practitioners;
- Information from our club’s insurance provider;
- Work, Health and Safety legislative requirements associated with the welfare of our volunteers;
- EA NSW branch; and
- The proximity of outbreaks to the Hastings Valley;
- The capabilities of a small club and committee to take on the responsibilities of a lock down situation (even a short one for a suspected case) at a public use facility.
Our Club understands that currently there is a great deal of controversy regarding whether Hendra vaccination should be mandatory or not, and that there are widespread implications for interstate and international competitors as well as significant costs. Further it is understood that many are pursuing a position that EA and its affiliates should not be allowed to mandate Hendra vaccination as a pre-condition for attending equestrian events.

Our club respects the rights of individuals to make decisions regarding the welfare of themselves and their horses. However, we remain concerned at the liability, cost and welfare implications associated with a Hendra case or a suspected Hendra case occurring at a club event.

Accordingly, we consider that clubs such as ours (affiliated with the EA), should be allowed have a requirement that horses competing at events be Hendra vaccinated. We need to manage the risks on the ground that we face, noting that we are in a geographic precinct that is considered to be at risk.

Our club respectfully requests that, clubs such as ours be able to take decisions appropriate to the risks being faced and not be mandated to operate in a manner that could expose the club, its committee, volunteers and its members to unnecessary risks and ongoing responsibilities and cost should we have even a suspected Hendra case at an event.

I trust that you will consider this submission as our ability to run future events may depend on the result.

Yours sincerely

The HVDC Inc. Committee

19th August 2015
I am an event organiser for Eventing competition in Queensland and would like to say it was a big relief to finally go Hendra vaccinated at our recent competition.

The sport of Eventing requires a vet on the grounds for both the jumping phases of the sport.

Vets work all week, and then are expected to support clubs by giving up their weekends to get a minimum fee, and in some circumstances no fee - and continue to take the risk of dealing with potentially sick horses that may be in the early stages of shedding the Hendra virus.

It is not only the vets that have a risk - but we as event organisers, all the riders, our club members, a huge number of volunteers, officials needed to run the competitions and even spectators. The risk is life threatening!!

I believe event organisers should be able to decide to minimise this risk by only accepting Hendra vaccinated horses at competitions. Since the vaccination has been made available we have followed the numbers of vaccinated horses at each competition and have for the last 12 months at least have had between 85% to 93% of Hendra vaccinated horses. With the large number of vaccinated horses, we felt it was fair to introduce the vaccination policy as it did not effect a huge number of riders. We had very little exclusion in that we allowed horses that had had their first dose as we did not have a huge lead time, riders could at least start their vaccination process - but not have completed the second dose.

From a risk management point of view, if there was an incident on the grounds - the grounds would be put into lock down.

A lock down in turn would effect the whole membership, and any other rider or person from using and training on the grounds. Our grounds are also used by locals who walk within the grounds. We sometimes have schools using our grounds for their kids cross country competition....all access would be denied.

This was all taken into consideration when deciding on the Hendra Policy for our last event, and we believe we made the right decision with our policy to vaccinate.

Yours faithfully,

Deb Postle
Event organiser (Fig Tree Pocket Equestrian Club)